MULTIPLE DEPENDENT CLAIM FEE CALCULATION SHEET (FOR USE WITH FORM PTO-875)

SERIAL NO.
10/ 587882
APPLICANT(S)

FILING DATE 8-1-06

CLAIMS

	AS FILED		AFTER		AFTER 2 ** AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
_1						
3	•	-				
5						•
6						
7						
<u>8</u> 9	·					
10						
11						
12						
13						
14 15				,		
16						4
17						
18 19						
20					· · ·	
20 21 22		-				
22_						
23						
24 25						
26						-
27			_			
28_						
<u>29</u> 30						
31		·				
32				3 · · · <u>2 · · · 2 · · · 2 · . · · · 2 · · · ·</u>		
33						
34_						
35 36	·					
36 37						
38						
39						<u> </u>
40 41						<u> </u>
42						
43						
43 44 45 46						
45						
46 47	\vdash			 		
48						
49						
50 TOTAL				<u>-</u> -		
IND.	み	† ₹		♣		➡
TOTAL DEP.	11	←		←		+
TOTAL CLAIMS	13	1				Part NA

S									
	AS FILED		AFTER 1"AMENDMENT		AFTER 2 MAMENDMENT				
	IND.	DEP.	IND.	DEP.	IND.	DEP.			
51									
52 53 54 55 56	2								
53									
55						-			
56									
57		,							
58 59									
59						<u> </u>			
60									
62					- "				
63									
64									
65									
66									
67 68			11	 					
69									
70									
71									
72 73		•							
73				ļ					
74 75				-					
76						 			
77									
78									
79									
80		\vdash				-			
81 82				-		<u> </u>			
83									
84									
85									
86									
87 88				 		1			
89						†			
90									
91									
92				ļ		ļ			
93	<u> </u>			 		 			
94 95	 								
96	 			†		1			
97				<u> </u>					
98				<u> </u>					
99	 	 		ļ					
100 TOTAL				 _	 				
IND.		」 <mark>♥</mark> │		」 ➡		.			
TOTAL DEP.		+		+		-			
TOTAL CLAIMS						100			